1999 DRAFTING REQUEST

Assembly Amendment (AA-ASA1-AB133)

Received: 06/23/99 Wanted: As time permits For: Assembly Republican Caucus 266-1452				Received By: kenneda Identical to LRB: By/Representing: Kratochwill												
								This file	may be shown	n to any legislat	or: NO		Drafter: kenneda Alt. Drafters:			
								May Co	ntact:							
Subject: Health - miscellaneous				Extra Copies:	TAY											
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ARC:	Kratochwill	#,														
Topic:																
Confide	entiality of heal	th care informa	tion													
Instruc	etions:															
See Atta	ached															
Draftin	ng History:					· · · · · · · · · · · · · · · · · · ·										
Vers.	Drafted	Reviewed	Typed	Proofed	Submitted	<u>Jacketed</u>	<u>Required</u>									
/1	kenneda 06/25/99	gilfokm 06/25/99	ismith 06/26/99		lrb_docadmin 06/26/99											
/2	kenneda 06/26/99	gilfokm 06/26/99	jfrantze 06/26/99		lrb_docadmin 06/26/99											
FE Sen	t For:															

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1999 DRAFTING REQUEST

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Identical to LRB:

For: Assembly Republican Caucus 266-1452

By/Representing: Kratochwill

This file may be shown to any legislator: NO

Drafter: kenneda

May Contact:

Alt. Drafters:

Subject:

Health - miscellaneous

Extra Copies: KMGTAY

Pre Topic:

ARC:.....Kratochwill - #--,

Topic:

Confidentiality of health care information

Instructions:

See Attached

Drafting History:

Vers.

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Drafted

kenneda

Reviewed

Submitted

Jacketed

Required

FE Sent For:

<END>



Passed

WISCONSIN LEGISLATIVE COUNCIL STAFF MEMORANDUM

One East Main Street, Suite 401; P.O. Box 2536; Madison, WI 53701-2536

Telephone: (608) 266-1304 Fax: (608) 266-3830 Email: leg.council@legis.state.wi.us

DATE:

June 22, 1999

TO:

REPRESENTATIVE GREGG UNDERHEIM

FROM:

Richard Sweet, Senior Staff Attorney

SUBJECT:

Proposal Regarding Confidentiality of Health Care Information

This memorandum summarizes a proposal regarding confidentiality of health care information collected by the Department of Health and Family Services (DHFS) under ch. 153, Stats. The following are the changes that the proposal would make to current law:

- 1. Under the proposal, all data obtained under ch. 153, Stats., would not be subject to inspection, copying or receipt under the Open Records Law. Under current law, only patient-identifiable data and health care provider-identifiable data are not subject to inspection, copying or receipt under the Open Records Law. RP 153.50(2) RP 153.55
- 2. One of the methods for DHFS to release data under current law is custom-designed reports. Under the proposal, for information submitted by health care providers who are not hospitals or ambulatory surgery centers, requests for data elements, other than those available for public use files, would require review and approval by a newly created Independent Review Board (IRB) before the data elements may be released in custom-designed reports. DHFS may release information that contains the name of a health care provider who is not a hospital or ambulatory surgery center only if either: (a) the IRB grants approval for the release; or (b) DHFS rules specify information that contains the name of such a provider that does not have to be reviewed and approved by the IRB prior to release.
- The IRB would consist of the following members: (a) a statistician or researcher; (b) a medical ethicist from the University of Wisconsin or the Medical College of Wisconsin; (c) a privacy expert; (d) a health care purchaser; and (e) the Commissioner of Insurance or his or her designee. The first four members would be appointed by the Governor. DHFS employes may not be members of the IRB. The IRB would be attached administratively to DHFS and members would serve staggered four-year terms. IRB rules must be approved by the Board on Health Care Information.

3. Under the proposal, for information submitted by health care providers who are not hospitals or ambulatory surgery centers, custom-designed reports may include the patient's zip code only if at least one of the following applies: (a) other potentially identifying data elements are not released; (b) population density is sufficient to mask patient identity; (c) other potentially identifying data elements are grouped to provide population density sufficient to protect identity; or (d) multiple years of data elements are added to protect identity. 153.45 (1)(e)

).Sweet: · wow realth provides

4. Current law provides that the identification of patients, employers or health care providers must be protected by all necessary means with respect to release of public use data files, including the deletion of patient identifiers and the use of calculated variables and aggre-The proposal adds that "all necessary means" also includes: gated variables. specification of counties as to residence, rather than zip codes; (b) the use of five-year categories for age, rather than exact age; (c) not releasing information regarding a patient's race or ethnicity or dates of admission, discharge, procedures or visits; and (d) masking sensitive diagnoses or procedures by use of larger diagnostic and procedure categories. 153. 45(1)(b)2.

 $\sqrt{5}$. Under the proposal, DHFS would be required to develop, for use by purchasers of data under ch. 153, Stats., a data use agreement that specifies data use restrictions, appropriate use of data and penalties for misuse of data, and must notify prospective and current purchasers of data of the appropriate uses. In addition, the proposal would require that a purchaser of data sign and have notarized the data use agreement. 153.50(3)(c)

6. The definition of "patient-identifiable data" in current law is expanded to include the following items, for information submitted by health care providers who are not hospitals or ambulatory surgery centers: (a) whether the patient's condition is related to employment and occurrence and place of an auto accident or other accident; (b) the date of first symptom of current illness, current injury or current pregnancy; (c) the first date of the patient's same or similar illness, if any; (d) the dates that the patient has been unable to work in his or her current occupation; (e) the dates of receipt by the patient of medical service; and (f) the patient's city, DHFS would be given authority to use calendar quarter of service, rather than date of service, in public use data files except in those instances where DHFS specifies by rule that the number of data elements included is too small to protect patient confidentiality. 153.45 (1)(b) 3. Evablithoup 1007

(wawis) For information submitted by health care providers who are not hospitals or ambulatory surgery centers: (a) the patient's month and year of birth may be released in custom-designed reports; and (b) the patient's full date of birth may be used only for the purposes in s. 153.50 (4), Stats., and subject to rules promulgated by DHFS.

Under current law, patient-identifiable data may be released to any of the following: (a) the patient or a person granted written permission by the patient; (b) an agent of DHFS who is responsible for patient-identifiable data in DHFS, in order to store and ensure the accuracy of the data; (c) a health care provider or his or her agent, in order to ensure the accuracy of the data; (d) DHFS, for epidemiological investigations or to eliminate duplicative databases; or (e) an entity that is required by federal or state statute to obtain the data, for epidemiological purposes or to eliminate duplicative databases. The proposal would say that patient-identifiable data may be released "only" under those circumstances. Also, the first circumstance would be repealed.

RP: 153.50(4)(a) /

153,50

(1)(6)2.

153.50

(6)(a)

153.50

(3)(6) 153.50 (6)

7. Current law requires DHFS to remove and destroy specified data elements on the uniform patient billing forms that are received by DHFS. Under the proposal, health care EN providers who are not hospitals or ambulatory surgery centers would be prohibited from submitting these data elements to DHFS. For hospitals and ambulatory surgery centers, the provider could choose not to submit them or to submit them and have DHFS remove them. Also, under the proposal, the following additional items would not be submitted by health care providers who are not hospitals or ambulatory surgery centers: (a) the patient's telephone number; (b) the insured's employer's name or school name; (c) all data regarding other insureds (except as →(6)(b) described in item 9.); (d) the patient's employer's or school name; (e) the patient's relationship to the insured; (f) the insured's identification number; (g) the insured's policy or group number; (h) the insured's date of birth and sex; and (i) the patient's marital, employment or student status,

 $\operatorname{\mathscr{V}}$ If providers submit any of the prohibited data elements, DHFS would be required to immediately return them to the providers. If the DHFS screening fails to initially detect the prohibited data elements, DHFS would be required to destroy them. (53.50(6)(d)

Under the proposal, health care providers submitting information to DHFS under ch. 153, Stats., would be immune from liability for any harm or damages resulting from either an inadvertent or negligent release of prohibited data elements while submitting data to DHFS, would be immune from liability under s. 146.84, Stats., when submitting data under ch. 153, Stats., and would be immune from liability for any harm or damages resulting from the release of any data by DHFS. 146.84(3) 153.50(3)(6)7:

- ✓ 8. Under the proposal, the patient's account number would be destroyed by DHFS after verification of data by DHFS and may only be used for verification. Health care providers would be prohibited from using either of the following as a patient account number: (a) the patients Social Security number or any substantial portion thereof; or (b) a number that is related to another patient identifying number. 153.50 (6)(e)
- $\sqrt{9}$. Under the proposal, for information submitted by health care providers who are not hospitals or ambulatory surgery centers, the name of the insured's payer or other insured's payer would be converted to a DHFS payer category code by the provider prior to submission.
 - 10. Under the proposal, an employer would be prohibited from requesting release of patient-identifiable data that is specific to an employe of that employer. 153.50(7)
 - 11. Under current law, whoever intentionally violates specified statutes or rules on release of data collected under ch. 153, Stats., may be fined not more than \$10,000, imprisoned for not more than nine months, or both. The proposal would increase the maximum fine to \$15,000 and the maximum imprisonment to one year. 153 90 (1)
 - 12. Under the proposal, public use data files for information submitted by health care providers who are not hospitals or ambulatory surgery centers may include only: (a) the patient's county; (b) payment source, by type; (c) the patient's age category by five-year intervals up to age 80, then a category of 80 and over; (d) the patient's procedure code; (e) the patient's diagnosis code; (f) charges per procedure code; (g) the name and address of the facility where services were rendered; (h) the patient's sex; (i) provider-specific information as specified

153,45(1)(6)

in item 2.; (j) quarterly dates of service as specified in item 6.; and (k) other information (other than patient-identifiable data) approved by the IRB.

153,45

- $\sqrt{13}$. Under the proposal, the department may not sell or distribute databases, for individuals who are health care providers, that can be linked with the public use data files, without the approval of the IRB.
- 14. Under current law, the Board of Health Care Information consists of 11 members, including a record administrator and five representatives of health care providers, two of whom must be physicians and one of whom must be a registered nurse. The proposal would require that the other two provider members be representatives of hospitals. Of the remaining five members, the proposal would require that at least two be employer purchasers of health care.

Feel free to contact me if I can be of further assistance.

RNS:all:wu;tlu;jal

Budget Amendments 1999- 2000



Statement of Intent

Confidentiality of Health Care Information Package

Legislator

Underheim

Amendment#

309

Staff contact

Status

Pass

Agency

DHFS Tax Cut

Summary

CONFIDENTIALITY OF HEALTH CARE INFORMATION PACKAGE - See Attached

Fiscal Impact

ARC Analyst

Request#:

3716

Wednesday, June 23, 1999 Page 1



Wisconsin Legislative Council Staff Memorandum

One East Main Street, Suite 401; P.O. Box 2536; Madison, WI 53701-2536 Telephone: (608) 266-1304 Fax: (608) 266-3830 Email: leg.council@legis.state.wi.us

DATE:

June 22, 1999

TO:

REPRESENTATIVE GREGG UNDERHEIM

FROM:

Richard Sweet, Senior Staff Attorney

SUBJECT:

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- 2. One of the methods for DHFS to release data under current law is custom-designed reports. Under the proposal, for information submitted by health care providers who are not hospitals or ambulatory surgery centers, requests for data elements, other than those available for public use files, would require review and approval by a newly created Independent Review Board (IRB) before the data elements may be released in custom-designed reports. DHFS may release information that contains the name of a health care provider who is not a hospital or ambulatory surgery center only if either: (a) the IRB grants approval for the release; or (b) DHFS rules specify information that contains the name of such a provider that does not have to be reviewed and approved by the IRB prior to release.

The IRB would consist of the following members: (a) a statistician or researcher; (b) a medical ethicist from the University of Wisconsin or the Medical College of Wisconsin; (c) a privacy expert; (d) a health care purchaser; and (e) the Commissioner of Insurance or his or her designee. The first four members would be appointed by the Governor. DHFS employes may not be members of the IRB. The IRB would be attached administratively to DHFS and members would serve staggered four-year terms. IRB rules must be approved by the Board on Health Care Information.

- 3. Under the proposal, for information submitted by health care providers who are not hospitals or ambulatory surgery centers, custom-designed reports may include the patient's zip code only if at least one of the following applies: (a) other potentially identifying data elements are not released; (b) population density is sufficient to mask patient identity; (c) other potentially identifying data elements are grouped to provide population density sufficient to protect identity; or (d) multiple years of data elements are added to protect identity.
- 4. Current law provides that the identification of patients, employers or health care providers must be protected by all necessary means with respect to release of public use data files, including the deletion of patient identifiers and the use of calculated variables and aggregated variables. The proposal adds that "all necessary means" also includes: (a) the specification of counties as to residence, rather than zip codes; (b) the use of five-year categories for age, rather than exact age; (c) not releasing information regarding a patient's race or ethnicity or dates of admission, discharge, procedures or visits; and (d) masking sensitive diagnoses or procedures by use of larger diagnostic and procedure categories.
- 5. Under the proposal, DHFS would be required to develop, for use by purchasers of data under ch. 153, Stats., a data use agreement that specifies data use restrictions, appropriate use of data and penalties for misuse of data, and must notify prospective and current purchasers of data of the appropriate uses. In addition, the proposal would require that a purchaser of data sign and have notarized the data use agreement.
- 6. The definition of "patient-identifiable data" in current law is expanded to include the following items, for information submitted by health care providers who are not hospitals or ambulatory surgery centers: (a) whether the patient's condition is related to employment and occurrence and place of an auto accident or other accident; (b) the date of first symptom of current illness, current injury or current pregnancy; (c) the first date of the patient's same or similar illness, if any; (d) the dates that the patient has been unable to work in his or her current occupation: (e) the dates of receipt by the patient of medical service; and (f) the patient's city. DHFS would be given authority to use calendar quarter of service, rather than date of service, in public use data files except in those instances where DHFS specifies by rule that the number of data elements included is too small to protect patient confidentiality.

For information submitted by health care providers who are not hospitals or ambulatory surgery centers: (a) the patient's month and year of birth may be released in custom-designed reports; and (b) the patient's full date of birth may be used only for the purposes in s. 153.50 (4), Stats., and subject to rules promulgated by DHFS.

Under current law, patient-identifiable data may be released to any of the following: (a) the patient or a person granted written permission by the patient; (b) an agent of DHFS who is responsible for patient-identifiable data in DHFS, in order to store and ensure the accuracy of the data; (c) a health care provider or his or her agent, in order to ensure the accuracy of the data; (d) DHFS, for epidemiological investigations or to eliminate duplicative databases; or (e) an entity that is required by federal or state statute to obtain the data, for epidemiological purposes or to eliminate duplicative databases. The proposal would say that patient-identifiable data may be released "only" under those circumstances. Also, the first circumstance would be repealed.

7. Current law requires DHFS to remove and destroy specified data elements on the uniform patient billing forms that are received by DHFS. Under the proposal, health care providers who are not hospitals or ambulatory surgery centers would be prohibited from submitting these data elements to DHFS. For hospitals and ambulatory surgery centers, the provider could choose not to submit them or to submit them and have DHFS remove them. Also, under the proposal, the following additional items would not be submitted by health care providers who are not hospitals or ambulatory surgery centers: (a) the patient's telephone number; (b) the insured's employer's name or school name; (c) all data regarding other insureds (except as described in item 9.); (d) the patient's employer's or school name; (e) the patient's relationship to the insured; (f) the insured's identification number; (g) the insured's policy or group number; (h) the insured's date of birth and sex; and (i) the patient's marital, employment or student status.

If providers submit any of the prohibited data elements, DHFS would be required to immediately return them to the providers. If the DHFS screening fails to initially detect the prohibited data elements, DHFS would be required to destroy them.

Under the proposal, health care providers submitting information to DHFS under ch. 153, Stats., would be immune from liability for any harm or damages resulting from either an inadvertent or negligent release of prohibited data elements while submitting data to DHFS, would be immune from liability under s. 146.84, Stats., when submitting data under ch. 153, Stats., and would be immune from liability for any harm or damages resulting from the release of any data by DHFS.

- 8. Under the proposal, the patient's account number would be destroyed by DHFS after verification of data by DHFS and may only be used for verification. Health care providers would be prohibited from using either of the following as a patient account number: (a) the patients Social Security number or any substantial portion thereof; or (b) a number that is related to another patient identifying number.
- 9. Under the proposal, for information submitted by health care providers who are not hospitals or ambulatory surgery centers, the name of the insured's payer or other insured's payer would be converted to a DHFS payer category code by the provider prior to submission.
- 10. Under the proposal, an employer would be prohibited from requesting release of patient-identifiable data that is specific to an employe of that employer.
- 11. Under current law, whoever intentionally violates specified statutes or rules on release of data collected under ch. 153, Stats., may be fined not more than \$10,000, imprisoned for not more than nine months, or both. The proposal would increase the maximum fine to \$15,000 and the maximum imprisonment to one year.
- 12. Under the proposal, public use data files for information submitted by health care providers who are not hospitals or ambulatory surgery centers may include only: (a) the patient's county; (b) payment source, by type; (c) the patient's age category by five-year intervals up to age 80, then a category of 80 and over; (d) the patient's procedure code; (e) the patient's diagnosis code; (f) charges per procedure code; (g) the name and address of the facility where services were rendered; (h) the patient's sex; (i) provider-specific information as specified

- in item 2.; (j) quarterly dates of service as specified in item 6.; and (k) other information (other than patient-identifiable data) approved by the IRB.
- 13. Under the proposal, the department may not sell or distribute databases, for individuals who are health care providers, that can be linked with the public use data files, without the approval of the IRB.
- 14. Under current law, the Board of Health Care Information consists of 11 members, including a record administrator and five representatives of health care providers, two of whom must be physicians and one of whom must be a registered nurse. The proposal would require that the other two provider members be representatives of hospitals. Of the remaining five members, the proposal would require that at least two be employer purchasers of health care.

Feel free to contact me if I can be of further assistance.

RNS:all:wu;tlu;jal

1999

Date (time) needed



CAUCUS BUDGET AMENDMENT D-NOTE
[ONLY FOR CAUCUS]

DAK : King :

See form AMENDMENTS — COMPONENTS & ITEMS.

CAUCUS AMENDMENT TO ASSEMBLY SUBSTITUTE AMENDMENT 1 TO 1999 ASSEMBLY BILL 133

>>FOR CAUCUS SUPERAMENDMENT — NOT FOR INTRODUCTION<<

At the locations indicated, amend the substitute amendment as follows:

#. Page, line:

1999 BILL

1

2

3

4

5

6

7

8

9

AN ACT to renumber 153.50 (1) (a); to renumber and amend 153.45 (1) (b) and 153.45 (1) (c); to amend 153.50 (1) (b) 2., 153.50 (1) (b) 3., 153.50 (1) (b) 9., 153.50 (1) (b) 10., 153.50 (3) (b) 1, 153.50 (3) (b) 2., 153.50 (3) (b) 3., 153.50 (4) (intro.) and 153.90 (1); and to create 15.195 (9), 153.45 (1) (b) 3., 153.45 (1) (b) 4., 153.45 (1) (b) 5., 153.45 (1) (b) 6., 153.45 (1) (c) 1. to 4., 153.50 (1) (b) 14., 153.50 (1) (b) 15., 153.50 (1) (b) 16., 153.50 (1) (b) 17., 153.50 (1) (b) 18., 153.50 (3) (c), 153.50 (3) (d), 153.50 (7) and 153.67 of the statutes; relating to: patient privacy protections in collection and dissemination of health care information and creating a privacy institutional review board.

Analysis by the Legislative Reference Bureau

Under current law, the department of health and family services (DHFS) must collect, analyze and disseminate health care information, as adjusted for case mix and severity, in language that is understandable to lay persons, in order to provide to hospitals, health care providers, insurers, consumers, governmental agencies and others information concerning health care providers and uncompensated health care services and in order to provide information to assist in peer review for the purpose of quality assurance. Among the information collected by DHFS is that contained

BILL

on uniform patient billing forms, as provided by health care providers. To ensure that the identity of health care patients is protected when information obtained by DHFS is disseminated, DHFS must, among other things, remove and destroy specified information on the uniform patient billing forms. This information includes the patient's name and street address; the insured's name, address and telephone number; any other insured's name, employer name and date of birth; the signature of the patient and the insured and other authorized signatures; and the

signature of the physician.

Currently, DHFS must release data as standard reports, public use data files and custom—designed reports. However, DHFS may not release patient—identifiable data except to the patient or a person granted permission in writing by the patient; an agent of DHFS who is responsible for storage and ensuring the accuracy of the DHFS' data base; a health care provider or his or her agent, to ensure accuracy of information in the DHFS' data base; and staff of DHFS, or of an entity that is required by federal or state statute to obtain patient—identifiable data, for purposes of epidemiological investigation or to eliminate the need for duplicative data bases. ("Patient—identifiable data' is defined to mean the patient's medical record or chart number, control number, date of birth and employer's name; the dates of the patient's admission, discharge and principal procedure; the encrypted case identifier; the insured's policy number, date of birth and identification number; and the federal medicaid resubmission code and prior authorization number.)

This bill increases the information, received by DHFS on uniform patient billing forms under health care information requirements, that DHFS must remove and destroy. The information includes the patient's telephone number, the insured's

employer's name or school name and any other insured's school name.

The bill requires DHFS to develop for use by purchasers of health information data collected by DHFS, a data use agreement that specifies restrictions on data use, appropriate use and penalties for misuse. In addition, DHFS must notify prospective and current purchasers of data of the appropriate uses and require data purchasers

to sign and notarize the data agreement.

The bill enlarges the definition of "patient-identifiable data" to include, as information that may not be released except under specified circumstances, patient account numbers; a patient's school name; the sex of the insured; the patient's employment status and occurrence and place of accident; the date of the first symptom of the patient's current illness, injury or pregnancy; the first date of the patient's same or similar illness; dates that the patient has been unable to work in his or her current occupation; and dates of receipt by the patient of medical service.

The bill prohibits DHFS from releasing under public use data files information that includes less than 30 patient admissions, discharges, procedure or visits. Also the bill increases protection for patients, employers and health care providers by requiring that counties of residence, rather than zip codes, be used; requiring the use of five—year categories for age, rather than exact age; prohibiting release of information about a patient's race or ethnicity or dates of admission, discharge, procedures or visits; and requiring masking of sensitive diagnosis and procedures by use of larger diagnostic and procedure categories.

and

may not include an

BILL

played the department of The bill creates a privacy institutional review board, attached to DHFS, that and consists of five members, as specified in the bill. For custom-designed reports, the handle bill requires that requests for data elements other than those available for public use data files require review and approval by the privacy institutional review board and before release. Further, the bill limits custom-designed reports from including the patient's zip code unless of her potentially identifying data elements are not released; population density is sufficient to mask patient identity; other potentially identifying data elements are grouped to provide population density sufficient to protect identity of multiple years of data elements are added to protect identity.

Lastly, the bill increases the benalty for intentional violation of tentain limitations on release of health care information and protections of patient confidentiality.

For further information see the state and local fiscal estimate, which will be printed as an appendix to this bill

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows: the commissioner of wourance or his of her designee INSERT and the following SECTION 4. 15.195 (9) of the statutes is created to read: 15.195 (9) PRIVACY INSTITUTIONAL REVIEW BOARD. There is created a privacy 2 institutional review board that is attached to the department of health and family 3 services under s. 15.03. The board/shall consist of b) members who possess the 4 professional competence necessary to review specific research activities, as follows: 5 (a) A playsicianor physician researcher who is employed by the department of (6)Statistician or (7)health and family services.) Amedical ethicient of the university of Wisconsin System or the medical college of (8) (b) The state epidemiologist. (c) One person to represent the subunit of the department of health and family services that deals with Realth care information. (An expert in save (d) One person to represent the subunit of the department of health and family services that deals with supportive living, who is a researchen (12)

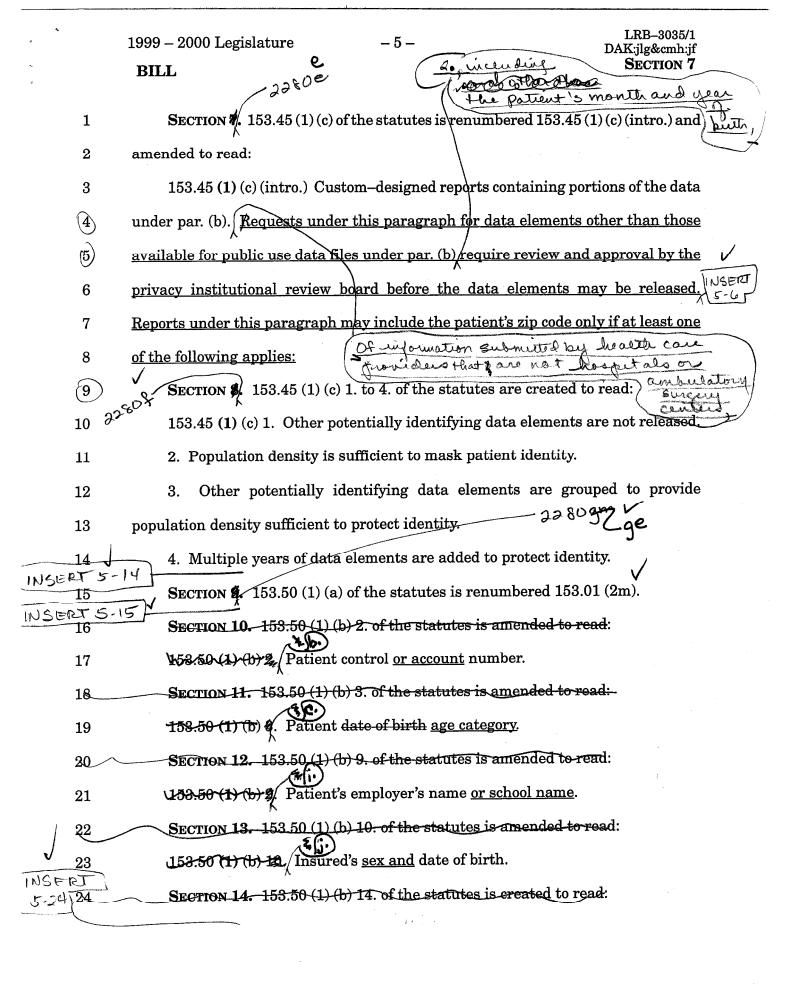
appointed for 4- year terms

BILL

INSERT 4.24

LRB-3035/1 DAK:jlg&cmh:jf SECTION 1

(e) One person who is not affiliated with the department of health and family services and is not part of the immediate family of a person who is affiliated with the department of health and family services, appointed for a 4-year term. 153.45 (1) (b) of the statutes is renumbered 153.45 (1) (b) 111100and/amended/to read: 5 153.45 (1) (b) (Material | Public) use 6 identification of specific patients, employers or health care providers, as defined by 7 rules promulgated by the department. No data released under this paragraphical 8 include less than 30 patient admissions discharges, procedures or visits 9 identification of these groups patients, employers or health care providers shall be 10 protected by all necessary means, including the 11 The deletion of patient identifiers and the 12 2.//the use of calculated variables and aggregated variables. 13 SECTION 3. 153.45 (1) (b) 3. of the statutes is created to read: 14 153.45 (1) (b) 3. The specification of counties as to residence, rather than zip 15 16 codes. SECTION 4. 153.45 (1) (b) 4. of the statutes is created to read: 17 153.45 (1) (b) 4. The use of 5-year categories for age, rather than exact age. 18 SECTION 5. 153.45 (1) (b) 5. of the statutes is created to read: 19 153.45 (1) (b) 5. Not releasing information concerning a patient's race or 20 ethnicity or dates of admission, discharge, procedures or visits. 21 SECTION 6. 153.45 (1) (b) 6. of the statutes is created to read: 22 153.45 (1) (b) 6. Masking sensitive diagnoses and procedures by use of larger 23diagnostic and procedure categories.



. Page 1526, luie 5; after that line useit:

STATE OF WISCONSIN – **LEGISLATIVE REFERENCE BUREAU** – LEGAL SECTION (608–266–3561)

	1134
	/ lax Section area
	A. (3)
/ 」	WIS " (A) INITIAL APPOINTMENTS OF PRIVACY INSTITUTIONAL
1	
	REVIEW BOARD. Notwithstanding the length of terms
	Executived in section 15.195(9) (intro.) of the statutes, as
	created by this act, the initial members of the privacy
	institutional neview board shall be appointed by
	the first day of the 4th mouth beginning after
	the effective date of this subsection to the
	following terms:
	(a) The purchaser of health car; for a term
	expering on May 1, 2002.
	(b) The medical ettricist, for a term
	expiring an May 1, 2003.
	(c) The statistician of researchet, for a term
	expiring on May 1, 2004. ".
	(End)
	ID-NOTE

[INSERTS-12]

30.9

Section #. 15.195 (6) of the statutes is amended to read:

15.195 (6) BOARD ON HEALTH CARE INFORMATION. There is created a board on health care information which is attached to the department of health and family services under s. 15.03. The board shall consist of 11 members, one of whom shall be a record administrator, registered by the American Medical Record Association, and 5 of whom shall be or represent health care providers, including one registered nurse, licensed under s. 441.06, and 2 physicians, as defined in s. 448.01 (5). The State Medical Society of Wisconsin may recommend board membership for 5 physicians, one of whom the governor shall appoint. The members shall be appointed for 4—year terms.

History: 1971 c. 219; 1977 c. 29 s. 1650m (2); 1977 c. 273; 1983 a. 27; 1983 a. 109 ss. 1, 3; 1985 a. 56; 1987 a. 399; 1989 a. 102, 107; 1991 a. 250; 1993 a. 16, 168, 184, 233; 1995 a. 27 ss. 138, 139, 9126 (19); 1995 a. 225, 305; 1997 a. 27 ss. 60e to 61, 93; 1997 a. 231.

in 3. 50.33(2) and at least 2

The whom shall be

employed purchasats

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. Page 1158, evie 11: after that line wesert:

"Section # 146.84 (3) of the statutes is amended to read:

2251r

146.84 (3) DISCIPLINE OF EMPLOYES. Any person employed by the state, any political subdivision of the state who violates s. 146.82 or 146.83 may be discharged or suspended without pay. ".

History: 1991 a. 39; 1993 a. 445.

, except a hearth care provider that negliciently violates 5.153.40(6)(c),

V # Page 1170, luie 18: after that line moest:

SECTION 2280C. CR; 153.45 (1) (b) 2. 153.45(1)(b) 2. For information that is submitted health care provider other than ambulatory Surgery centers, public use data files that pumit the identification patients, employers or health care as defined by rules promulgated by the department. The identification of patients employers or health care prouders shall be protected by all necessary means, including the deletion of patient identificial; the variables and aggregated variables; the specification of countries as to residence, nather than codes; the use of 5-year categories exact age; not releasing information concerning a patient's race or ethnicity dates of a discharge, procedures or

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by use of larger diagnostic and procedure catégories.
Public use data files under this subdivision may
include only the following:
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b. Du payment source, by type.
c. The patient's age category, by 5-year
c. The fatters & age careford, by soyear
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intervals up to age 80 and a category of
Coyear or older.
Eo year or older.
d. Dhe patient's procedure code.
e. The patient : diagnosis code.
9
f. Charges assessed with respect to the
\
procedure code.
V
g. The name and address of the facility patient's in which the Services were rendered.
J' 4 ' 4 '
/ Palient &
in which the Services were rendered.
M
li. The patient 's Sex.

STATE OF WISCONSIN - LEGISLATIVE REFERENCE BUREAU - LEGAL SECTION (608-266-3561)

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que de de la contains the name of a health care
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Surgery center why for the
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approved the release or if the department.
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under which the privacy institutional review board
need not review and approve the release.
j. Carendar quarters of service.
K. Information other than patient identifiable
data, as defined in s. 153.50 (1) (b), as approved
by the privacy institutional remem board.

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INSERT 4-24-CONT
SECTION 2280d. CR; 153.45 (1) (b) 3.
(in public use data files)
153.45 (1)(b) 3. The use of calendar quarters of
service, nather than date of service, except under
circumstances that the department specifies by
rate that the number of data elements included
is too small to enable justicition of patient
confidentiality.

STATE OF WISCONSIN – LEGISLATIVE REFERENCE BUREAU – LEGAL SECTION (608–266–3561)

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153.45 (6) The department may not seel or
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by the institutional neview board.

Section of 153.50 (1) (b) Matters of the statutes is amended to read:

153.50 (1) (b) Matters of the statutes is amended to read:

153.50 (1)(b) 1. (intro.),

153.50 (1)(

153.50 (1) (b) (intro.) "Patient-identifiable data" means all of the following data elements:

History: 1987 a. 399; 1989 a. 18; 1993 a. 16; 1995 a. 27 s. 9126 (19); 1997 a. 27, 231.

STATE OF WISCONSIN – **LEGISLATIVE REFERENCE BUREAU** – LEGAL SECTION (608–266–3561)

[INSERT 5-24] V
am
SECTION 2280 CR; 153.50 (1) (b) 2.
·
153.50 (1) (6) 2. "Patient - identifiable data", for
information submitted by hearth care providers who
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surgery centers, are not hospitals or ambueatory service provides
means all of the following data elements:
a. Data elements specified un subd. 1. a. to s.

INS 6-12

STATE OF WISCONSIN – **LEGISLATIVE REFERENCE BUREAU** – **LEGAL SECTION** (608–266–3561)

A g. The patient's city, town or village.

,

(INSERT 6-12 CONT

2280h

Section \$ 153.50 (2) of the statutes is discontinuous repueled

153.50 (2) PROFIBITION ON RELEASE. Patient-identifiable data obtained under this chapter is not subject to inspection, copying or receipt under s. 19/35(1) and may not be released by the department except as provided in sub. (4).

HISTORY: 1987 a. 399; 1989 a. 18; 1993 a. 16; 1995 a. 27 s. 9126 (19); 1997 a. 27, 231.

(INSERT 6.20

STATE OF WISCONSIN – LEGISLATIVE REFERENCE BUREAU – LEGAL SECTION (608–266–3561)

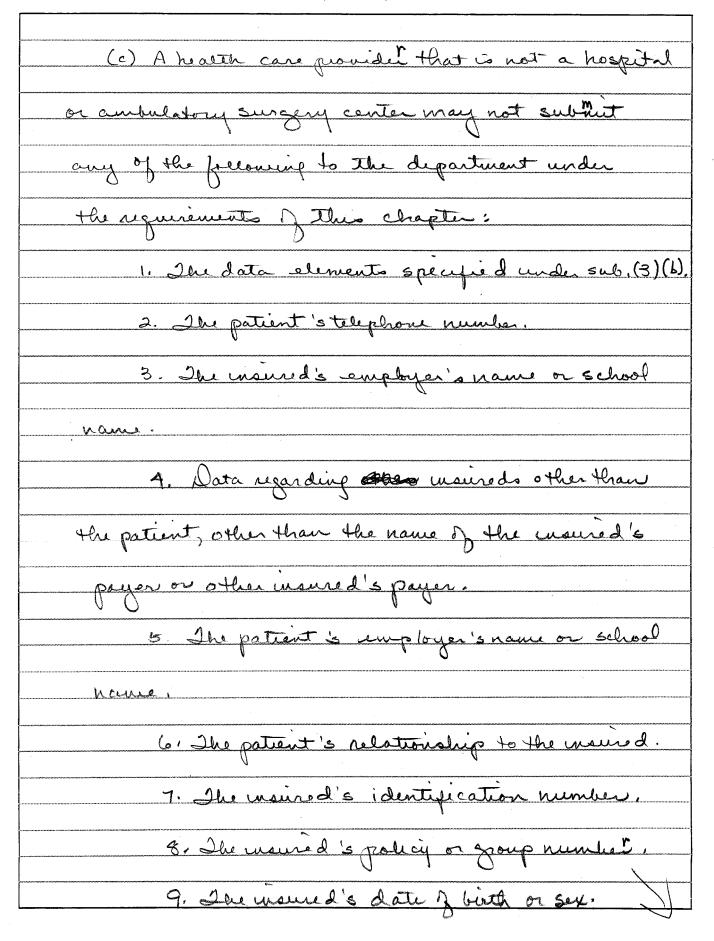
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SECTION 2280; CR; 153.50(3)(b) 7.
153.50 (3) (b) ?. The patient's account number,
(we only as)
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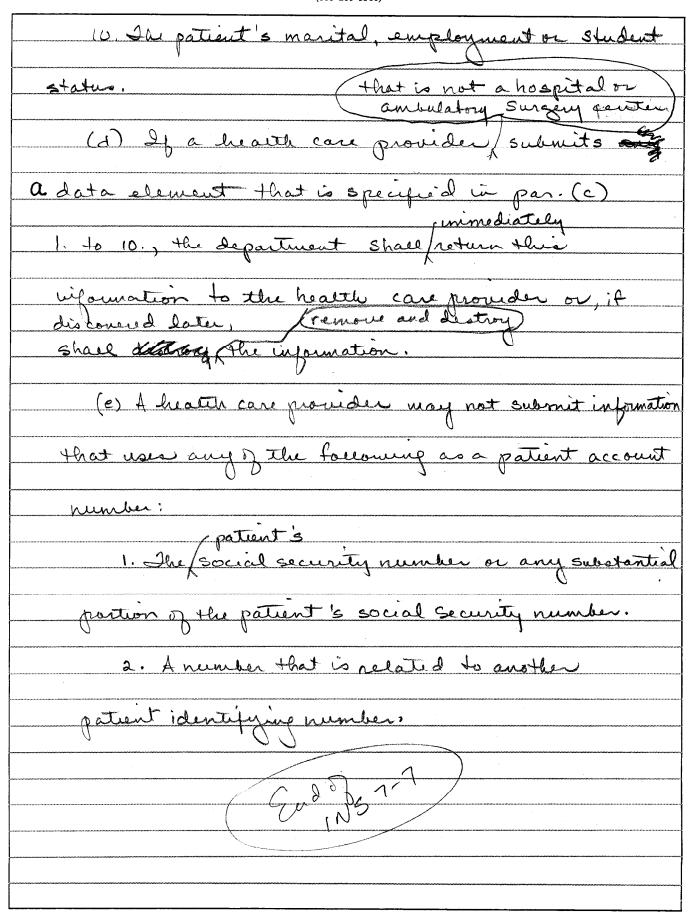
STATE OF WISCONSIN-LEGISLATIVE REFERENCE BUREAU - LEGAL SECTION (608-266-3561)

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153.50 (Bm) HEALTHCARE PROVIDER MEASURES
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A hearth care provider that is not a hospital or
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INSERT 7-7
INSERT 7-7 SECTION 2. RP; 153.50 (4) (a) 1. SECTION 2. RN; 153.50 (4) (b) +0 (e); 153.50 (4) (a) 1. +04.
SECTION 22 RP- 153,50 (4) (a)
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SECTION2. RN; 153.50(4)(b) to (e); 153,50(4)(a)1. to 4.
SECTION 2280 CRY; 153.50 (4)(b)
153.50(4)(b) of information submitted by
health care providers that are not hospitals or
ambulatory surgery centers, patient-identifiable
data that contains a patient's date of built
under this subsection (under circumstances)
data that contains a patient's date of birth under this subsection (under circumstances) may be released oney (as specified by
rate by the department.
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[NSERT 7-7A] V" SECTION 2280 PRN; 153.50(6); 153.50(6)(a)
· · · · · · · · · · · · · · · · · · ·
SECTION) 2280 V. CR; 153.50 (G/b), (c), (d) and (e)
153.50(6)(b) The department may not
runder this chapter
require la hearth care provider that is a
hospital or ambulatory surgery center to
submit uniform patient billing forms.

10) S 7 - 7 STATE OF WISCONSIN - LEGISLATIVE REFERENCE BUREAU - LEGAL SECTION (608-266-3561)





or VINSERT 7-11

Section #. 153.55 of the statutes is amended to read:

7 Data

153.55 Protection of health care provider confidentiality. Health care provider identifiable data

obtained under this chapter is not subject to inspection, copying or receipt under s. 19.35 (1).

History: 1997 a. 231.

#. Page 1172, line 14: after that live uset.

STATE OF WISCONSIN - LEGISLATIVE REFERENCE BUREAU - LEGAL SECTION (608-266-3561)

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SECTION 228. CR; 153.76
B) 153.76 RULE-MAKING BY THE PRIVACY INSTRUTIONAL Notwithstanding S. 15:01 (Ir), Noview board. the privacy institutional review board
15 5.16 PULE-MARING BY THE PRIVACY INSCRIPTIONAL
Not withstanding s. (5.01 (Ir),
review board. The privacy institutional review board
may promulgate only those rules that are first
reviewed and approved by the board. F. of
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nemented and approved by the board. Then
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Section #. 153.50 (5) (b) 3. of the statutes is amended to read:

153.50 (5) (b) 3. For a person who believes that he or she is authorized under sub. (4), the action provided under s. 19.37.

History: 1987 a. 399; 1989 a. 18; 1993 a. 16; 1995 a. 27 s. 9126 (19); 1997 a. 27, 231.

126 (19); 1997 a. 27, 231.

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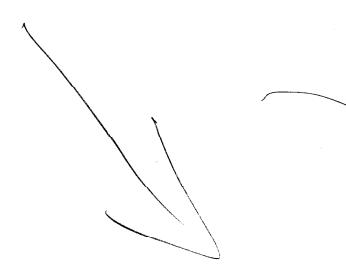
Whis SEC.

2280KV.

-2280Ku Section 4. 153.50 (5) (a) (intro.) of the statutes is amended to read:

153.50 (5) (a) (intro.) The department may not release or provide access to patient-identifiable data to a person authorized under sub. (4) (a), (e), (d) or (e) unless the authorized person requests the department, in writing, to release the patient-identifiable data. The request shall include all of the following:

History: 1987 a. 399; 1989 a. 18; 1993 a. 16; 1995 a. 27 s. 9126 (19); 1997 a. 27, 231.



Section #. 153.50 (5) (a) 3. of the statutes is amended to read:

153.50 (5) (a) 3. For a person who is authorized under sub. (4) (a), (e) or (d) to receive or have access to patient—identifiable data, evidence, in writing, that indicates that authorization.

History: 1987 a. 399; 1989 a. 18, 1993 a. 16,1995 a. 18. 520 118, 1997 227 280 KX Lucre.

History: 1987 a. 399; 1989 a. 18, 1993 a. 16,1995 a. 18. 22 118, 1997 227 280 KX Lucre.

History: 1987 a. 399; 1989 a. 18, 1993 a. 16,1995 a. 18. 22 118, 1997 227 280 KX Lucre.

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the memorandum of June 22, 1999, from Dick Sweet Heat proposes immunity from liability for brain
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or damages resulting from the release of data by
DHFS, because under 9.146.82(2)(a)5.
health care providus are required to submit
patient information ui response to a legacey authorized
State agency request; therefore, the immunity is
in applicable Further, I drafted the immunity
for inadvertent or negligent release to apply
oney to 5.146.84 (3), because other prohibitions
in 5,146.84 apply to only to Knowing and
willful release.
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DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRBb1143/1dn DAK:kmg:ijs

June 26, 1999

I have not drafted that part of item no. 7 of the memorandum of June 22, 1999, from Dick Sweet that proposes immunity from liability under s. 146.84 for harm or damages resulting from the release of data by DHFS, because under s. 146.82 (2) (a) 5. health care providers are *required* to submit patient information in response to a legally authorized state agency request; therefore, the immunity is inapplicable. Further, I drafted the immunity for inadvertent or negligent release to apply only to s. 146.84 (3), because other prohibitions in s. 146.84 apply only to knowing and wilful release.

Debora A. Kennedy Managing Attorney Phone: (608) 266–0137 (TODAY - In edit 6/26)

1999 - 2000 LEGISLATURE

LRBb1143/*/>
DAK:kmg:

ARC:.....Kratochwill – #—, Confidentiality of health care information FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION CAUCUS AMENDMENT TO ASSEMBLY SUBSTITUTE AMENDMENT 1, TO 1999 ASSEMBLY BILL 133

At the locations indicated, amend the substitute amendment as follows:

1. Page 24, line 9: after that line insert:

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"Section 3g. 15.195 (6) of the statutes is amended to read:

15.195 (6) BOARD ON HEALTH CARE INFORMATION. There is created a board on health care information which is attached to the department of health and family services under s. 15.03. The board shall consist of 11 members, one of whom shall be a record administrator, registered by the American Medical Record Association, and; 5 of whom shall be or represent health care providers, including one registered nurse, licensed under s. 441.06, and 2 physicians, as defined in s. 448.01 (5); 2 of whom shall represent hospitals, as defined in s. 50.33 (2); and at least 2 of whom shall

1	be employer purchasers of health care. The State Medical Society of Wisconsin may
2	recommend board membership for 5 physicians, one of whom the governor shall
3	appoint. The members shall be appointed for 4-year terms.
4	SECTION 30r. 15.195 (9) of the statutes is created to read:
5	15.195 (9) PRIVACY INSTITUTIONAL REVIEW BOARD. There is created a privacy
6	institutional review board that is attached to the department of health and family
7	services under s. 15.03. The board may not include an employe of the department
8	of health and family services and shall consist of the commissioner of insurance or
9	his or her designee and the following members appointed for 4-year terms:
10	(a) A statistician or researcher.
11	(b) A medical ethicist of the University of Wisconsin System or the Medical
12	College of Wisconsin.
13	(c) An expert in issues relating to privacy.
14	(d) A purchaser of health care.".
15	2. Page 1158, line 11: after that line insert:
16	"SECTION 2251r. 146.84 (3) of the statutes is amended to read:
(17)	146.84 (3) DISCIPLINE OF EMPLOYES. Any person employed by the state; any
18	political subdivision of the state who violates s. 146.82 or 146.83, except a health care
19	provider that negligently violates s. 153.50 (6) (c), may be discharged or suspended
20	without pay.".
21	3. Page 1170, line 18: after that line insert:
22	"Section 2280b. 153.45 (1) (b) of the statutes is renumbered 153.45 (1) (b) 1.
23	and amended to read:

(10)

ambulatory surgery centers, public use data files which that do not permit the identification of specific patients, employers or health care providers, as defined by rules promulgated by the department. The identification of these groups patients, employers or health care providers shall be protected by all necessary means, including the deletion of patient identifiers and the use of calculated variables and aggregated variables.

SECTION 2280c. 153.45 (1) (b) 2. of the statutes is created to read:

other than ambulatory surgery centers, public use data files that do not permit the identification of specific patients, employers or health care providers, as defined by rules promulgated by the department. The identification of patients, employers or health care providers shall be protected by all necessary means, including the deletion of patient identifiers; the use of calculated variables and aggregated variables; the specification of counties as to residence, rather than zip codes; the use of 5-year categories for age, rather than exact age; not releasing information concerning a patient's race or ethnicity or dates of admission, discharge, procedures or visits; and masking sensitive diagnoses and procedures by use of larger diagnostic and procedure categories. Public use data files under this subdivision may include only the following:

- a. The patient's county of residence.
- b. The payment source, by type.
- c. The patient's age category, by 5-year intervals up to age 80 and a category of 80 years or older.
 - d. The patient's procedure code.

1	e. The patient's diagnosis code.
2	f. Charges assessed with respect to the procedure code.
3	g. The name and address of the facility in which the patient's services were
4	rendered.
5	h. The patient's sex.
6	i. Information that contains the name of a health care provider that is not a
7	hospital or ambulatory surgery center, if the privacy institutional review board first
8	reviews and approves the release or if the department promulgates rules that specify
9	circumstances under which the privacy institutional review board need not review
10	and approve the release.
11	j. Calendar quarters of service.
12	k. Information other than patient-identifiable data, as defined in s. 153.50 (1)
13	(b), as approved by the privacy institutional review board.
14	SECTION 2280d. 153.45 (1) (b) 3. of the statutes is created to read: (**Most specify*) 153.45 (1) (b) 3. **Phosphip public use data files of calendar quarters of service,
16	rather than date of service, except under circumstances that the department (if
17)	specifies by rule that the number of data elements included is too small to enable
18	protection of patient confidentiality.
19	SECTION 2280e. 153.45 (1) (c) of the statutes is renumbered 153.45 (1) (c)
20	(intro.) and amended to read:
21	153.45 (1) (c) (intro.) Custom-designed reports containing portions of the data
22	under par. (b). Of information submitted by health care providers that are not
	hospitals or ambulatory surgery centers, requests under this paragraph for data
23	elements other than those available for public use data files under par. (b) 2.,
24	including the patient's month and year of birth, require review and approval by the
25	including the patients month and year of our off, require review and approver by the

1	privacy institutional review board before the data elements may be released.
2	Information that contains the name of a health care provider that is not a hospital
3	or ambulatory surgery center may be released only if the privacy institutional review
4	board first reviews and approves the release or if the department promulgates rules
5	that specify circumstances under which the privacy institutional review board need
6	not review and approve the release. Reports under this paragraph may include the
7	patient's zip code only if at least one of the following applies:
8	SECTION 2280f. 153.45 (1) (c) 1. to 4. of the statutes are created to read:
9	153.45 (1) (c) 1. Other potentially identifying data elements are not released.
10	2. Population density is sufficient to mask patient identity.
11	3. Other potentially identifying data elements are grouped to provide
12	population density sufficient to protect identity.
13	4. Multiple years of data elements are added to protect identity.
14	SECTION 2280g. 153.45 (6) of the statutes is created to read:
15	153.45 (6) The department may not sell or distribute data bases of information,
16	from health care providers who are not hospitals or ambulatory surgery centers, that
17	are able to be linked with public use data files, unless first approved by the privacy
18	institutional review board.
19	SECTION 2280ge. 153.50 (1) (a) of the statutes is renumbered 153.01 (2m).
20	SECTION 2280gg. 153.50 (1) (b) of the statutes is renumbered 153.50 (1) (b) 1.,
21	and 153.50 (1) (b) 1. (intro.), b., c., i. and j., as renumbered, are amended to read:
22	153.50 (1) (b) 1. (intro.) "Patient-identifiable data", for information submitted
23	by hospitals and ambulatory surgery centers, means all of the following data
24	elements:

b. Patient control or account number.

1	c. Patient date of birth age category.
2	i. Patient's employer's name <u>or school name</u> .
3	j. Insured's <u>sex and</u> date of birth.
4	SECTION 2280gm. 153.50 (1) (b) 2. of the statutes is created to read:
5	153.50 (1) (b) 2. "Patient-identifiable data", for information submitted by
6	health care providers who are not hospitals or ambulatory surgery centers, means
7	all of the following data elements:
8	a. Data elements specified in subd. 1. a. to g.
9	b. Whether the patient's condition is related to employment, and occurrence
10	and place of an auto accident or other accident.
11	c. Date of first symptom of current illness, of current injury or of current
12	pregnancy.
13	d. First date of patient's same or similar illness, if any.
14	e. Dates that the patient has been unable to work in his or her current
15	occupation.
16	f. Dates of receipt by patient of medical service.
17	g. The patient's city, town or village.
18	SECTION 2280h. 153.50 (2) of the statutes is repealed.
19	SECTION 2280i. 153.50 (3) (b) 7. of the statutes is created to read:
20	153.50 (3) (b) 7. The patient's account number, after use only as verification of
21	data by the department.
22	SECTION 2280j. 153.50 (3) (c) of the statutes is created to read:
23	153.50 (3) (c) Develop, for use by purchasers of data under this chapter, a data
24	use agreement that specifies data use restrictions, appropriate uses of data and

1	penalties for misuse of data, and notify prospective and current purchasers of data
2	of the appropriate uses.
3	SECTION 2280k. 153.50 (3) (d) of the statutes is created to read:
4	153.50 (3) (d) Require that a purchaser of data under this chapter sign and have
5	notarized the data use agreement of the department specified in par. (c).
6	SECTION 2280km. 153.50 (3m) of the statutes is created to read:
7	153.50 (3m) Healthcare provider measures to ensure patient identity
8	PROTECTION. A health care provider that is not a hospital or ambulatory surgery
9	center shall, before submitting information required by the department under this
10	chapter, convert to a payer category code as specified by the department any names
11	of an insured's payer or other insured's payer.
12	SECTION 2280kp. 153.50 (4) (intro.) of the statutes is renumbered 153.50 (4)
13	(a) (intro.) and amended to read:
14	153.50 (4) (a) (intro.) Under Except as specified in par. (b), under the
15	procedures specified in sub. (5), release of patient-identifiable data may be made
16	only to any of the following:
17	SECTION 2280kq. 153.50 (4) (a) of the statutes is repealed.
18	Section 2280kr. $153.50(4)(b)$ to (e) of the statutes are renumbered $153.50(4)$
19	(a) 1. to 4.
20	SECTION 2280ks. 153.50 (4) (b) of the statutes is created to read:
21	153.50 (4) (b) Of information submitted by health care providers that are not
22	hospitals or ambulatory surgery centers, patient-identifiable data that contains a
23	patient's date of birth may be released under this subsection only under
24	circumstances as specified by rule by the department.
25	SECTION 2280ku. 153.50 (5) (a) (intro.) of the statutes is amended to read:

1	155.50 (b) (a) (miro.) The department may not release or provide access to
2	patient-identifiable data to a person authorized under sub. (4) (a), (e), (d) or (e)
3	unless the authorized person requests the department, in writing, to release the
4	patient-identifiable data. The request shall include all of the following:
5	SECTION 2280kv. 153.50 (5) (a) 3. of the statutes is amended to read:
6	153.50 (5) (a) 3. For a person who is authorized under sub. (4) (a), (c) or (d) to
7	receive or have access to patient-identifiable data, evidence, in writing, that
/ 8	indicates that authorization.
9	SECTION 2280kx. 153.50 (5) (b) 3. of the statutes is amended to read:
10	153.50 (5) (b) 3. For a person who believes that he or she is authorized under
11	sub. (4) (a), the action provided under s. 19.37.".
12	4. Page 1170, line 22: after that line insert:
13	"Section 2280p. 153.50 (6) of the statutes is renumbered 153.50 (6) (a).
14	SECTION 2280q. $153.50(6)(b)$, (c), (d) and (e) of the statutes are created to read:
15	153.50 (6) (b) The department may not require under this chapter a health care
16	provider that is a hospital or ambulatory surgery center to submit uniform patient
17	billing forms.
18	(c) A health care provider that is not a hospital or ambulatory surgery center
19	may not submit any of the following to the department under the requirements of
20	this chapter:
21	1. The data elements specified under sub. (3) (b).
22	2. The patient's telephone number.
23	3. The insured's employer's name or school name.

1	4. Data regarding insureds other than the patient, other than the name of the
2	insured's payer or other insured's payer.
3	5. The patient's employer's name or school name.
4	6. The patient's relationship to the insured.
5	7. The insured's identification number.
6	8. The insured's policy or group number.
7	9. The insured's date of birth or sex.
8	10. The patient's marital, employment or student status.
9	(d) If a health care provider that is not a hospital or ambulatory surgery center
10	submits a data element that is specified in par. (c) 1. to 10., the department shall
11	immediately return this information to the health care provider or, if discovered
12	later, shall remove and destroy the information.
13	(e) A health care provider may not submit information that uses any of the
14	following as a patient account number:
15	1. The patient's social security number or any substantial portion of the
16	patient's social security number.
17	2. A number that is related to another patient identifying number.
18	SECTION 2280r. 153.55 of the statutes is amended to read:
19	153.55 Protection of health care provider confidentiality. Health care
20	provider identifiable data Data obtained under this chapter is not subject to
21	inspection, copying or receipt under s. 19.35 (1).".

5. Page 1172, line 14: after that line insert:

"Section 2283g. 153.67 of the statutes is created to read:

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153.67 Privacy institutional review board. The privacy institutional review board shall review any request under s. 153.45 (1) (c) for data elements other than those available for public use data files under s. 153.45 (1) (b). Unless the privacy institutional review board approves such a request, the data elements requested may not be released. SECTION 2283h. 153.76 of the statutes is created to read: Rule-making by the privacy institutional review board. Notwithstanding s. 15.01 (1r), the privacy institutional review board may promulgate only those rules that are first reviewed and approved by the board on health care information. SECTION 2283k. 153.90 (1) of the statutes is amended to read: 153.90 (1) Whoever intentionally violates s. 153.45 (5) or 153.50 or rules promulgated under s. 153.75(1)(a) may be fined not more than \$10,000 \$15,000 or imprisoned for not more than 9 months one year or both.". **6.** Page 1526, line 5: after that line insert: INITIAL APPOINTMENTS OF PRIVACY INSTITUTIONAL REVIEW BOARD. (12x)Notwithstanding the length of terms specified in section 15.195 (9) (intro.) of the statutes, as created by this act, the initial members of the privacy institutional review board shall be appointed by the first day of the 4th month beginning after the effective date of this subsection for the following terms: (a) The purchaser of health care, for a term expiring on May 1, 2002.

(b) The medical ethicist, for attern expiring on May 1, 2002. (c) The statistician or researcher, for a term expiring on May 1, 2004

and the privacy expert

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1999-2000 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

	INCEPT O O (3280KW)
1	INSERT 8-8
2	SECTION 2. 153.50 (5) (a) 4. (intro.) of the statutes is amended to read:
3	153.50 (5) (a) 4. (intro.) For an entity that is authorized under sub. (4) (e) (a)
4	4. to receive or have access to patient-identifiable data, evidence, in writing, of all
5	of the following:

History: 1987 a. 399; 1989 a. 18; 1993 a. 16; 1995 a. 27 s. 9126 (19); 1997 a. 27, 231.



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State of Misconsin 1999 - 2000 LEGISLATURE

LRBb1143/2 DAK:kmg:jf

ARC:.....Kratochwill – #—, Confidentiality of health care information FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION CAUCUS AMENDMENT TO ASSEMBLY SUBSTITUTE AMENDMENT 1, TO 1999 ASSEMBLY BILL 133

At the locations indicated, amend the substitute amendment as follows:

2 **1.** Page 24, line 9: after that line insert:

"Section 3g. 15.195 (6) of the statutes is amended to read:

15.195 (6) Board on Health care information. There is created a board on health care information which is attached to the department of health and family services under s. 15.03. The board shall consist of 11 members, one of whom shall be a record administrator, registered by the American Medical Record Association, and; 5 of whom shall be or represent health care providers, including one registered nurse, licensed under s. 441.06, and 2 physicians, as defined in s. 448.01 (5); 2 of whom shall represent hospitals, as defined in s. 50.33 (2); and at least 2 of whom shall

and amended to read:

1	be employer purchasers of health care. The State Medical Society of Wisconsin may
2	recommend board membership for 5 physicians, one of whom the governor shall
3	appoint. The members shall be appointed for 4-year terms.
4	SECTION 30r. 15.195 (9) of the statutes is created to read:
5	15.195 (9) Privacy institutional review board. There is created a privacy
6	institutional review board that is attached to the department of health and family
7	services under s. 15.03. The board may not include an employe of the department
8	of health and family services and shall consist of the commissioner of insurance or
9	his or her designee and the following members appointed for 4-year terms:
10	(a) A statistician or researcher.
11	(b) A medical ethicist of the University of Wisconsin System or the Medical
12	College of Wisconsin.
13	(c) An expert in issues relating to privacy.
14	(d) A purchaser of health care.".
15	2. Page 1158, line 11: after that line insert:
16	"Section 2251r. 146.84 (3) of the statutes is amended to read:
17	146.84 (3) DISCIPLINE OF EMPLOYES. Any person employed by the state, or any
18	political subdivision of the state who violates s. 146.82 or 146.83, except a health care
19	provider that negligently violates s. 153.50 (6) (c), may be discharged or suspended
20	without pay.".
21	3. Page 1170, line 18: after that line insert:
22	"Section 2280b. 153.45 (1) (b) of the statutes is renumbered 153.45 (1) (b) 1.

ambulatory surgery centers, public use data files which that do not permit the identification of specific patients, employers or health care providers, as defined by rules promulgated by the department. The identification of these groups patients, employers or health care providers shall be protected by all necessary means, including the deletion of patient identifiers and the use of calculated variables and aggregated variables.

SECTION 2280c. 153.45 (1) (b) 2. of the statutes is created to read:

other than hospitals or ambulatory surgery centers, public use data files that do not permit the identification of specific patients, employers or health care providers, as defined by rules promulgated by the department. The identification of patients, employers or health care providers shall be protected by all necessary means, including the deletion of patient identifiers; the use of calculated variables and aggregated variables; the specification of counties as to residence, rather than zip codes; the use of 5-year categories for age, rather than exact age; not releasing information concerning a patient's race or ethnicity or dates of admission, discharge, procedures or visits; and masking sensitive diagnoses and procedures by use of larger diagnostic and procedure categories. Public use data files under this subdivision may include only the following:

- a. The patient's county of residence.
- b. The payment source, by type.
- c. The patient's age category, by 5-year intervals up to age 80 and a category of 80 years or older.
 - d. The patient's procedure code.

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1	e. The patient's diagnosis code.
2	f. Charges assessed with respect to the procedure code.
3	g. The name and address of the facility in which the patient's services were
4	rendered.
5	h. The patient's sex.
6	i. Information that contains the name of a health care provider that is not a
7	hospital or ambulatory surgery center, if the privacy institutional review board first
8	reviews and approves the release or if the department promulgates rules that specify
9	circumstances under which the privacy institutional review board need not review
10	and approve the release.
11	j. Calendar quarters of service.
12	k. Information other than patient-identifiable data, as defined in s. 153.50 (1)
13	(b), as approved by the privacy institutional review board.
14	SECTION 2280d. 153.45 (1) (b) 3. of the statutes is created to read:
15	153.45 (1) (b) 3. Public use data files that specify calendar quarters of service
16	rather than date of service, except if the department specifies by rule that the
17	number of data elements included in the public use data file is too small to enable
18	protection of patient confidentiality.
19	SECTION 2280e. 153.45 (1) (c) of the statutes is renumbered 153.45 (1) (c)
20	(intro.) and amended to read:
21	153.45 (1) (c) (intro.) Custom-designed reports containing portions of the data
22	under par. (b). Of information submitted by health care providers that are no
23	hospitals or ambulatory surgery centers, requests under this paragraph for data

elements other than those available for public use data files under par. (b) 2..

including the patient's month and year of birth, require review and approval by the

1	privacy institutional review board before the data elements may be released.
2	Information that contains the name of a health care provider that is not a hospital
3	or ambulatory surgery center may be released only if the privacy institutional review
4	board first reviews and approves the release or if the department promulgates rules
5	that specify circumstances under which the privacy institutional review board need
6	not review and approve the release. Reports under this paragraph may include the
7	patient's zip code only if at least one of the following applies:
8	SECTION 2280f. 153.45 (1) (c) 1. to 4. of the statutes are created to read:
9	153.45 (1) (c) 1. Other potentially identifying data elements are not released.
10	2. Population density is sufficient to mask patient identity.
11	3. Other potentially identifying data elements are grouped to provide
12	population density sufficient to protect identity.
13	4. Multiple years of data elements are added to protect identity.
14	SECTION 2280g. 153.45 (6) of the statutes is created to read:
15	153.45 (6) The department may not sell or distribute data bases of information,
16	from health care providers who are not hospitals or ambulatory surgery centers, that
17	are able to be linked with public use data files, unless first approved by the privacy
18	institutional review board.
19	Section 2280ge. 153.50 (1) (a) of the statutes is renumbered 153.01 (2m).
20	SECTION 2280gg. $153.50(1)(b)$ of the statutes is renumbered $153.50(1)(b)1.$,
21	and 153.50 (1) (b) 1. (intro.), b., c., i. and j., as renumbered, are amended to read:
22	153.50 (1) (b) 1. (intro.) "Patient-identifiable data", for information submitted
23	by hospitals and ambulatory surgery centers, means all of the following data
24	elements:
25	b. Patient control or account number.

1	c. Patient date of birth age category.
2	i. Patient's employer's name or school name.
3	j. Insured's <u>sex and</u> date of birth.
4	SECTION 2280gm. 153.50 (1) (b) 2. of the statutes is created to read:
5	153.50 (1) (b) 2. "Patient-identifiable data", for information submitted by
6	health care providers who are not hospitals or ambulatory surgery centers, means
7	all of the following data elements:
8	a. Data elements specified in subd. 1. a. to g.
9	b. Whether the patient's condition is related to employment, and occurrence
10	and place of an auto accident or other accident.
11	c. Date of first symptom of current illness, of current injury or of current
12	pregnancy.
13	d. First date of patient's same or similar illness, if any.
14	e. Dates that the patient has been unable to work in his or her current
15	occupation.
16	f. Dates of receipt by patient of medical service.
17	g. The patient's city, town or village.
18	SECTION 2280h. 153.50 (2) of the statutes is repealed.
19	SECTION 2280i. 153.50 (3) (b) 7. of the statutes is created to read:
20	153.50 (3) (b) 7. The patient's account number, after use only as verification of
21	data by the department.
22	SECTION 2280j. 153.50 (3) (c) of the statutes is created to read:
23	153.50 (3) (c) Develop, for use by purchasers of data under this chapter, a data
94	use agreement that specifies data use restrictions, appropriate uses of data and

1	penalties for misuse of data, and notify prospective and current purchasers of data
2	of the appropriate uses.
3	SECTION 2280k. 153.50 (3) (d) of the statutes is created to read:
4	153.50 (3) (d) Require that a purchaser of data under this chapter sign and have
5	notarized the data use agreement of the department specified in par. (c).
6	SECTION 2280km. 153.50 (3m) of the statutes is created to read:
7	153.50 (3m) Healthcare provider measures to ensure patient identity
8	PROTECTION. A health care provider that is not a hospital or ambulatory surgery
9	center shall, before submitting information required by the department under this
10	chapter, convert to a payer category code as specified by the department any names
11	of an insured's payer or other insured's payer.
12	SECTION 2280kp. 153.50 (4) (intro.) of the statutes is renumbered 153.50 (4)
13	(a) (intro.) and amended to read:
14	153.50 (4) (a) (intro.) Under Except as specified in par. (b), under the
15	procedures specified in sub. (5), release of patient-identifiable data may be made
16	only to any of the following:
17	SECTION 2280kq. 153.50 (4) (a) of the statutes is repealed.
18	SECTION 2280kr. 153.50 (4) (b) to (e) of the statutes are renumbered 153.50 (4)
19	(a) 1. to 4.
20	SECTION 2280ks. 153.50 (4) (b) of the statutes is created to read:
21	153.50 (4) (b) Of information submitted by health care providers that are not
22	hospitals or ambulatory surgery centers, patient-identifiable data that contains a
23	patient's date of birth may be released under this subsection only under
24	circumstances as specified by rule by the department.
25	SECTION 2280ku. 153.50 (5) (a) (intro.) of the statutes is amended to read:

1	153.50 (5) (a) (intro.) The department may not release or provide access to
2	patient-identifiable data to a person authorized under sub. (4) (a), (c), (d) or (e)
3	unless the authorized person requests the department, in writing, to release the
4	patient-identifiable data. The request shall include all of the following:
5	SECTION 2280kv. 153.50 (5) (a) 3. of the statutes is amended to read:
6	153.50 (5) (a) 3. For a person who is authorized under sub. (4) (a), (c) or (d) to
7	receive or have access to patient-identifiable data, evidence, in writing, that
8	indicates that authorization.
9	SECTION 2280kw. 153.50 (5) (a) 4. (intro.) of the statutes is amended to read:
10	153.50 (5) (a) 4. (intro.) For an entity that is authorized under sub. (4) (e) (a)
11	4. to receive or have access to patient-identifiable data, evidence, in writing, of all
12	of the following:
13	SECTION 2280kx. 153.50 (5) (b) 3. of the statutes is amended to read:
14	153.50 (5) (b) 3. For a person who believes that he or she is authorized under
15	sub. (4) (a), the action provided under s. 19.37.".
16	4. Page 1170, line 22: after that line insert:
17	"Section 2280p. 153.50 (6) of the statutes is renumbered 153.50 (6) (a).
18	SECTION 2280q. 153.50(6)(b), (c), (d) and (e) of the statutes are created to read:
19	153.50 (6) (b) The department may not require under this chapter a health care
20	provider that is a hospital or ambulatory surgery center to submit uniform patient
21	billing forms.
22	(c) A health care provider that is not a hospital or ambulatory surgery center
23	may not submit any of the following to the department under the requirements of
24	this chapter:

1	1. The data elements specified under sub. (3) (b).
2	2. The patient's telephone number.
3	3. The insured's employer's name or school name.
4	4. Data regarding insureds other than the patient, other than the name of the
5	insured's payer or other insured's payer.
6	5. The patient's employer's name or school name.
7	6. The patient's relationship to the insured.
8	7. The insured's identification number.
9	8. The insured's policy or group number.
10	9. The insured's date of birth or sex.
11	10. The patient's marital, employment or student status.
12	(d) If a health care provider that is not a hospital or ambulatory surgery center
13	submits a data element that is specified in par. (c) 1. to 10., the department shall
14	immediately return this information to the health care provider or, if discovered
15	later, shall remove and destroy the information.
16	(e) A health care provider may not submit information that uses any of the
17	following as a patient account number:
18	1. The patient's social security number or any substantial portion of the
19	patient's social security number.
20	2. A number that is related to another patient identifying number.
21	SECTION 2280r. 153.55 of the statutes is amended to read:
22	153.55 Protection of health care provider confidentiality. Health care
23	provider-identifiable data Data obtained under this chapter is not subject to
24	inspection, copying or receipt under s. 19.35 (1).".

5.	Page 1172	, line 1	14: after	that line	insert:

"Section 2283g. 153.67 of the statutes is created to read:

153.67 Privacy institutional review board. The privacy institutional review board shall review any request under s. 153.45 (1) (c) for data elements other than those available for public use data files under s. 153.45 (1) (b). Unless the privacy institutional review board approves such a request, the data elements requested may not be released.

SECTION 2283h. 153.76 of the statutes is created to read:

153.76 Rule-making by the privacy institutional review board. Notwithstanding s. 15.01 (1r), the privacy institutional review board may promulgate only those rules that are first reviewed and approved by the board on health care information.

SECTION 2283k. 153.90 (1) of the statutes is amended to read:

153.90 (1) Whoever intentionally violates s. 153.45 (5) or 153.50 or rules promulgated under s. 153.75 (1) (a) may be fined not more than \$10,000 \$15,000 or imprisoned for not more than 9 months one year or both.".

6. Page 1526, line 5: after that line insert:

- "(12x) Initial appointments of privacy institutional review board. Notwithstanding the length of terms specified in section 15.195 (9) (intro.) of the statutes, as created by this act, the initial members of the privacy institutional review board shall be appointed by the first day of the 4th month beginning after the effective date of this subsection for the following terms:
 - (a) The purchaser of health care, for a term expiring on May 1, 2001.

- 1 (b) The medical ethicist and the privacy expert, for terms expiring on May 1, 2 2003.
- 3 (c) The statistician or researcher, for a term expiring on May 1, 2005.".

4 (END)